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| <b>TRANSMITTAL FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> |  | Application Number     | 09/492,561       |
|  |  | Filing Date            | January 27, 2000 |
|  |  | First Named Inventor   | Regis Crinon     |
|  |  | Art Unit               | 2611             |
|  |  | Examiner Name          | Andrew Y. Koenig |
| Total Number of Pages in This Submission   |  | Attorney Docket Number | 7146.0042        |

| ENCLOSURES (check all that apply)   |  |   |
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| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Postcard |
| <b>Remarks</b>  |  |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |          |        |
|--|--|----------|--------|
| Firm                                       | Chernoff, Vilhauer, McClung & Stenzel, LLP<br>1600 ODS Tower<br>601 S.W. Second Avenue<br>Portland, OR 97204 |          |        |
| Signature                                  |  |          |        |
| Printed Name                               | Kurt Rohlf   |          |        |
| Date                                       | May 25, 2006   | Reg. No. | 54,405 |

| CERTIFICATE OF TRANSMISSION/MAILING   |            |      |              |
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| Typed or printed name   | Kurt Rohlf | Date | May 25, 2006 |

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